

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | ASD | | 2/12/01 |
| FORMALITY REVIEW | SE | 5C886 | 02.26.01 |
| RESPONSE FORMALITY REVIEW | Wet | 571 | 05/21/01 |
| | Zm | 927 | 06/13/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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Best Available Copy

If more than 150 claims or 10 actions
 staple additional sheet here

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